

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Born Fighting PAC

ADDRESS (number and street)

607 14th Street, NW Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00430819

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

11

02

2010

in the  
State of

DC

5. Covering Period

10

14

2010

through

11

22

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paul Fraim

Signature of Treasurer

Electronically Filed by Paul Fraim

Date

12

02

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 17

Write or Type Committee Name  
Born Fighting PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	29475.93
(b) Cash on Hand at Beginning of Reporting Period .....	39197.00	
(c) Total Receipts (from Line 19) .....	10012.59	108597.59
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49209.59	138073.52
7. Total Disbursements (from Line 31) .....	10089.69	98953.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	39119.90	39119.90
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 17

Write or Type Committee Name

Born Fighting PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	3633.33	18133.33
(ii) Unitemized .....	4379.26	7964.26
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	8012.59	26097.59
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2000.00	82500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	10012.59	108597.59
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	10012.59	108597.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10012.59	108597.59

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	6589.69	69239.65	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	6589.69	69239.65	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	24349.19	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	500.00	5364.78	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10089.69	98953.62	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10089.69	98953.62	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	10012.59	108597.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10012.59	108597.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6589.69	69239.65
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6589.69	69239.65

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**Full Name (Last, First, Middle Initial)  
Lonnie ChafinMailing Address 1455 Carmen  
Suite 1820City State Zip Code  
Chicago IL 60640FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northern IL Conf UMCOccupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: C4664062

Amount of Each Receipt this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
Gregory P. Luth

Mailing Address 2288 Tulip Road

City State Zip Code  
San Jose CA 95128FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gregory P. Luth & Associa-  
tesOccupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: C4664057

Amount of Each Receipt this Period

250.00

**C.**Full Name (Last, First, Middle Initial)  
Nicholas Ruffin

Mailing Address 400 Chain Bridge Road

City State Zip Code  
McLean VA 22101FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ferris Baker WattsOccupation  
Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: C4664068

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

Thomas Barlow

Mailing Address 1716 12th St South

City

Arlington

State

VA

Zip Code

22204

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
U.S. Department of Commer-  
ce

Occupation

Trade Policy Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: C4661629A

Amount of Each Receipt this Period

50.00

\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.**C**

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: C4661629AB

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

Thomas Corcoran

Mailing Address 7710 Brookville Road

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Self - Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: C4659676A

Amount of Each Receipt this Period

333.33

\* Earmarked Contribution:  
See Below

SUBTOTAL of Receipts This Page (optional) .....

383.33

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 1 0

Transaction ID: C4659676AB

Amount of Each Receipt this Period

333.33

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

James J. Glasser

Mailing Address 13262 E. Saddlerock Road

City

Tucson

State

AZ

Zip Code

85749

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

Transaction ID: C4659226A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4659226AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Harris

Mailing Address PO Box 446

City

Palmyra

State

VA

Zip Code

22963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	0

Transaction ID: C4659230A

Amount of Each Receipt this Period

500.00

\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	0

Transaction ID: C4659230AB

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

Steve Nash

Mailing Address 9108 Windover Court

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of RichmondOccupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

Transaction ID: C4661665A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution:  
See Below

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0

Transaction ID: C4661665AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Whitten Peters

Mailing Address 2220 Windsor Road

City

Alexandria

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Williams & Connolly LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

Transaction ID: C4659272A

Amount of Each Receipt this Period

500.00

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4659272AB

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

James Powell

Mailing Address 137 Player Court

City

Massanutten

State

VA

Zip Code

22840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WPL Inc.

Occupation  
Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

Transaction ID: C4659240A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4325.98

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: C4659240AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

3633.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)

Babcock & Wilcox Company PAC

Mailing Address 2016 Mount Athos Road

City

Lynchburg

State

VA

Zip Code

24504

FEC ID number of contributing  
federal political committee.

**C**

C00365502

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: C4569859

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Pfizer Inc. PAC

Mailing Address 235 East 42nd Street

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing  
federal political committee.

**C**

C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Transaction ID: C4608591

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Born Fighting PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D282427</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>13.17</div> </div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D282428</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>2.65</div> </div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D282429</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>83.58</div> </div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**99.40**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Born Fighting PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D283994</p> <p>Date of Disbursement 10 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 143.52</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AWF Consulting, Inc.</p> <p>Mailing Address 426 C Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Services &amp; Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D282476</p> <p>Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 3349.42</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Express EMPS</p> <p>Mailing Address P.O. Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D283902</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 189.21</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3682.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Born Fighting PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Amy L. Hogan	<b>Transaction ID:</b> D281686 <b>Date of Disbursement</b>
Mailing Address 9479 Cloverdale Court	<div> <div>10</div> <div>25</div> <div>2010</div> </div>
City State Zip Code Burke VA 22015	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Website Consulting Services Candidate Name	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) NGP Software	<b>Transaction ID:</b> D281685 <b>Date of Disbursement</b>
Mailing Address 1225 I Street, NW, Suite 1225	<div> <div>10</div> <div>26</div> <div>2010</div> </div>
City State Zip Code Washington DC 20005	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Database Services Candidate Name	<div>300.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Perkins Coie LLP	<b>Transaction ID:</b> D281684 <b>Date of Disbursement</b>
Mailing Address 607 Fourteenth Street N.W. Suite 800	<div> <div>10</div> <div>26</div> <div>2010</div> </div>
City State Zip Code Washington DC 20005	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Legal & Accounting Services Candidate Name	<div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**2800.00**

**TOTAL** This Period (last page this line number only) .....

**6581.55**

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 17

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Born Fighting PAC

**A.**

Full Name (Last, First, Middle Initial)  
Gerry Connolly For Congress

Mailing Address P.O. Box 563

City Merrifield State VA Zip Code 22116

Purpose of Disbursement  
Contribution

Candidate Name  
Gerry Connolly

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 11

**Transaction ID:** D281688

Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Sestak for Senate

Mailing Address PO Box 1936

City Media State PA Zip Code 19063

Purpose of Disbursement  
Contribution

Candidate Name  
Joseph A. Sestak, Jr.

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District:

**Transaction ID:** D281687

Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

3000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

McEachin For Senate

Mailing Address 5905 W. Broad Street  
Suite 100

City Richmond State VA Zip Code 23230

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D281241

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

500.00